

2/24/22, 4:53 PM

Division of Corporations

F22000001135

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (954)208-0845
Fax Number : (614)573-3996

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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**FOREIGN PROFIT/NONPROFIT CORPORATION
NBIC SERVICE COMPANY, INC**

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

2022 FEB 24 PM 5:01

22 FEB 24 AM 10:07

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FEB 25 2022
T. LEMIEUX

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. NBIC Service Company, Inc.
 (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. RI 3. 26-3867627
 (State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 5/6/2008 5. _____
 (Date of incorporation) (Date of duration, if other than perpetual)

6. _____
 (Date first transacted business in Florida, if prior to registration)
 (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1301 Atwood Avenue, Suite 316E, Johnston, Rhode Island 02919
 (Principal office street address)

PO Box 820, Pawtucket, Rhode Island 02860
 (Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C.T. Corporation System

Office Address: 1200 South Pine Island Road

Plantation FL. 33324
 (City) (Zip code)

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

C.T. Corporation System

By: Denise Bell Denise Bell, Assistant Secretary
 (Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

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FEB 26 11:00 AM '07

A. DIRECTORS

☐ Chairman Name: Kirk Howard Lusk

☐ Vice Chairman Address: _____

☐ Director _____

☐ President _____

☐ Vice President _____

☒ Secretary ☒ Treasurer

☒ Other CFO ☐ Other _____

☐ Chairman Name: Joseph Peiso

☐ Vice Chairman Address: _____

☐ Director _____

☐ President _____

☒ Vice President _____

☐ Secretary ☐ Treasurer

☒ Other Assistant Secretary ☐ Other _____

☒ Chairman Name: Richard Widdicombe

☐ Vice Chairman Address: _____

☒ Director _____

☐ President _____

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: Ernesto Jose Garateix

☐ Vice Chairman Address: _____

☒ Director _____

☐ President _____

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other CEO ☐ Other _____

☐ Chairman Name: Irini Barlas

☐ Vice Chairman Address: _____

☒ Director _____

☐ President _____

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: Timothy Michael Moura

☐ Vice Chairman Address: _____

☐ Director _____

☒ President _____

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

12 _____
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. Joseph Peiso, Vice President/Assistant Secretary
(Typed or printed name and capacity of person signing application)



State of Rhode Island
Department of State | Office of the Secretary of State
Nellie M. Gorbea, Secretary of State

CERTIFICATE OF GOOD STANDING

I, Nellie M. Gorbea, Secretary of State and custodian of the seal and corporate records of the State of Rhode Island, hereby certify that:

NBIC Service Company, Inc.

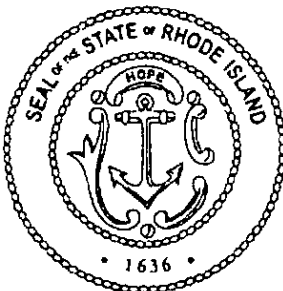
is a Rhode Island Business Corporation organized on **May 06, 2008**. I further certify that revocation proceedings are not pending; articles of dissolution have not been filed; all annual reports are of record and the corporation is active and in good standing with this office.

This certificate is not to be considered as a notice of the corporation's tax status, financial condition or business practices; such information is not available from this office.

SIGNED and SEALED on

February 22, 2022

Secretary of State



Certificate Number: 22020104810

Verify this Certificate at: <http://business.sos.ri.gov/CorpWeb/Certificates/Verify.aspx>

Processed by: dantonelli